in

♣Join us (registration.php) ⊕Log in (https://journal.atmph-specialissues.org/admin/) ☑ abubakar_yarogh@yahoo.com (mailto:abubakar_yarogh@yahoo.com)



Editorial Board

Editor-In-Chief

Abubakar Yaro (Dr Yaro Laboratory, Scotland & AHRO Institute of Health Sciences & Research, Scotland)
(Editorial Office)

Associate Editor

Dr. Tanmay Mahapatra (University of California, USA)

Dr. Nasir Umar (BNI, Germany)

Professor Sanaa Kamal (Ain Shams University, Egypt)

ww.journal.almphlebellaneisleb.mgdedylunalYaradugnUpiversity, Nigeria)

Dr. Ricardo Correa (Brown University University USA)

Professor Michael W Popejoy (Florida International University, USA)

Members of the Editorial Board

Anne Phiri (Dovecot College of Nursing, Zambia)

Adama Gansane (University of Ouagadugou, Burkina Faso)

Abubakar DAFFE (Universite Cheikh Anta Diop, Senegal)

Elwyn Chomba (University of Zambia Zambia)

Stanley Almeida (Universidade Federal do Para-UFPABrazil)

Wenbiao Hu (Queensland University of Technology, Australia)

Delenasaw Yewhalaw (Jimma University, Ethiopia)

MD Abul Kalam Azad (International Islamic University, Malaysia)

Professor Ayad F Alkaim (University of Babylon, Iraq)

International Advisory Board

Professor Ishaq Adam (University of Khartoum, Sudan)

Professor Worachat Sirawaraporn (Mahidol University, Thailand)

Professor Nadira Karunaweera (University of Colombo, Sri Lanka)

Professor Azra Qamar (Government College Shahra-e-Liaquat, Pakistan)

Professor Jayanth Panyam (University of Minessota, USA)

Professor Rebecca M Wurtz (University of Minessota, USA)

Professor Guilio Rastelli (University of Modena and Reggio, Italy)

Professor Joe Kabukoba (Shire Healthcare, UK)

Professor Rosa Maria Esteves Arantes (Universidade Federal de Minas Gerais, Brazil)

Professor Ikram Guizani (Pasteur Institute, Tunisia)

Professor Fatima Cordoso (Champalimaud Clinical Center, Portugal)

Executive Assistant

Business Development Manager

Special Issues Editors

Dr Ayad F Akraim (University of Babylon, Iraq)

Dr Roy R Marzo (Asia Metropolitan University, Malaysia)

Dr. Saad Abdulmumin (Bureau for Global Health, Office of Population & Reproductive Health, USAID, USA)

Dr. Roy Hendroko Setyobudi (Indonesia)

Scientific Consultant

Professor SG Ahmed (Zagaig University, Egypt)

Most viewed articles

in

Health education intervention adopting new habits for elementary school teachers prevents COVID-19 in Sanga-Sanga, East Kalimantan, Indonesia (abstract.php?article_id=9209)

vw.journal.atmph-specialissues.org/editorial_board.php)

Stakeholders' perspectives of factors that enable primary health center accreditation in eastern Indonesia (abstract.php?article_id=9169)

Search Articles

Enter search text

Title

Search

Sign in (admin) / Sign up (registration.php)

Visitor Counter

coming soon

Total published articles

1644

HYPNOSIS FOR PAIN MANAGEMENT AT WOMEN IN POST PARTUM PERIODS

Desiyani Nani*1, Mega Rizky Wijayanti², Koernia Nanda Pratama¹, Lita Heni Kusumawardani¹

¹⁾Nursing Program, Faculty of Health Sciences, Jenderal Soedirman University, Purwokerto, Central Java, Indonesia
²⁾Academic Hospital, Gadjah Mada University, Yogyakarta, Indonesia

*Corresponding Author: DesiyaniNani, email: desiyani.fahrudin@gmail.com

Abstract

Background: Hypnosis is used increasingly for healthcare applications in hospitals, clinics, and psychotherapy practice. The subconscious mind which is extremely complex contains all of our emotions, creativity, intuition, and a whole host of resources that control our bodily functions such as breathing, heart rate and metabolism. Then our body learns to relax into a trance state. Relaxation and suggestion increase parasympathetic and decrease sympathetic functions because of a direct effect of the hypnosis state. So, hypnotic treatment possible to control pain intensity.

Purpose: To evaluate the effects of hypnotic treatment on pain after episiotomy in post partum periods.

Methods: A single blind randomized clinical trial was performed on six eligible women who were at the beginning of post partum periods. The participants were matched by 24 hours duration after birthing, nulliparas. There was no additional administration of analgesics during the study period. The women received hypnotic treatment for 15 minutes. Theintensity of pain were measured by using the Visual Analogue Scale for Pain (VASP). VASP measured before and immediately after treatment. Then, were compared between the paired groups and statistical analyses were performed using SPSS 20.

Results: Six patients (100%) were nulliparas. The mean of ages was $(28 \pm 5.94 \text{ years old})$. The mean of pain score before treatment was $(84, 29 \pm 15, 65 \text{ mm})$ and mean of pain score after treatment was $(64.57 \pm 15.80 \text{ mm})$ There were significant differences between two the groups in intensity of pain before and immediately after treatment. The pain intensity after the treatment was significantly decrease than before (p = 0.04).

Conclusion: Hypnotic treatment reduced the severity of pain at the beginning of post partum periods after episiotomy. These findings showed that hypnotic treatment was effective for reducing pain. Hypnotic treatment can be an effective pain management for Indonesia women in post partum periods.

Keyword: Mind, subconscious, mother, episiotomy, complementary

INTRODUCTION

Pain at mother post birthing become stressor that could impaired mother activity, immmobility, limited interaction with their baby (bonding attacment mother-baby), prolong hospitalization, increase cost. Pain and anxiety are two important complications (1). The significance of pain is assimilated early in life. Gradually we learn the limits of our body, internalize the ways to avoid pain and the commonly accepted ways to react to it; we realize the role of pain in punishing and sometimes bringing pleasure (2). The interaction of the body and the mind is complex. In a spiritual trance, some martial arts or life-threatening situations the perception of pain is sometimes reported to disappear completely (3). Even simple relaxation or distraction is often enough to gain an analgesic effect (4).

Another problem with the literature is that little research has been done in this setting for clinical management of anxiety. The nature of the hypnotic induction has not been described in detail making replication difficult and the description of the hypnotic intervention has been poor: hypnotizability has not been measured, and there is no

Annals of Tropical Medicine & Public Health http://doi.org/10.36295/ASRO.2021.24302

prospective plan for subject entry (5). Based on our previous study, we have found hypnotherapy to be an effective and complementary method that decreases resting pain and re-experience (6). Re-experience is one of the complications of post trauma stress syndrome 'PTSD'

Hypnosis is used increasingly for healthcare applications in hospitals, clinics, and psychotherapy practice. "Hypnotherapy has been shown to be effective as an alternative anesthesia for childbirth "(7). The subconscious mind which is extremely complex contains all of our emotions, creativity, intuition, and a whole host of resources that control our bodily functions such as breathing, heart rate and metabolism (8). Then our body learns to relax into a trance state (9). Relaxation and suggestion increase parasympathetic and decrease sympathetic functions because of a direct effect of the hypnosis state (10). So, hypnotic treatment potential and will be possible to control pain intensity especially after episiotomy incision. This study was to evaluate the effects of hypnotic treatment on pain after episiotomy in mother at post partum periods.

METHODS

A single blind randomized clinical trial was performed on six eligible women who were at the beginning of post partum periods. The participant were matched by 24 hours duration after birthing, nulliparas. There were no additional administration of analgesics during the study period. The women received hypnotic treatment for 15 minutes.

Theintensity of pain were measured by using the Visual Analogue Scale for Pain (VASP). VASP measured before and immediately after treatment. The VASP is regarded as one of the most reliable and valid scales for measurement of clinical pain, and has a statistically meaningful value in the pain control literature (Syriala and Chapman, 1984). This instrument consists of a 100 mm vertical line with the description 'no pain' at the bottom and 'worst possible pain' at the top for pain measurement;) Then, were compared between the paired groups and statistical analyses were performed using SPSS 20.

RESULT

Six patients (100%) were nulliparas. The mean of ages was $(22.3 \pm 3.56 \text{ years old})$. The mean of pain score before treatment was $(95.67 \pm 12.08 \text{ mm})$ and mean of pain score after treatment was $(55.17 \pm 21.67 \text{ mm})$.

There were significant differences between two the groups in intensity of pain before and immediately after treatment. The pain intensity after the treatment was significantly decrease than before (p = 0.001).

Table 1: Socio-demographic factors of participants

Maternal factors	Frequencies (n)	Percentage(%)	
Maternal age (years)			
< 25	4	66,7	
26-35	2	33,3	
Parity			
Prim ipara	6	100	
Multipara	0	0	
Socioeconomic status			
Low	3	42.8	
Middle	3	42.8	
High	0	0	
H/o Abortion			
No	6	100	
Yes	0	0	
H/o Fetal death in	previous	Pregnancy	
No	6	100	

Yes 0 0

Table.2. Intensity of pain with Visual Analogue Scale (VAS) for Pain (1-100 mm)

Score of Pain	Frequency (n)	Percentage (%)	
Before treatment			
<50	0	0	
50-75	0	0	
>75	6	100	
After treatment			
<50	4	66,7	
50-75	0	0	
>75	2	33,3	

Table 3. Intensity of pain's rate scale before and after CBH treatment

Treatment	Freq. (n)	Mean±SD	Min-max	95% CI	P value
Before treatment	6	95,67 ± 12,08	82-109	25,872-55,128	
After treatment	6	55,17 ± 21,67	35-82		0,001

DISCUSSION

The pain pathways proceed from pain receptors through the spine to the brain where they separate (11). The recognition, interpretation and evaluation of pain signals continue in different parts of the brain. One pathway goes through the thalamus towards the somatosensory cortex where the origin, quality, magnitude and length of the pain perception are processed (12)

The interaction of the body and the mind is complex. In a spiritual trance, some martial arts or life-threatening situations the perception of pain is sometimes reported to disappear completely (13,14). Even simple relaxation or distraction is often enough to gain an analysis effect. Reduced pain ratings during the pain treatment with hypnosis are also associated with functional changes in the pain processing regions of the brain (5,9,15).

This present study find that CBH is able to effectively reduce the intensity of pain post episiotomy at mother after birthing. Similar with the results of study conducted In 1977, Barber introduced a hypnotic technique entitled 'rapid induction analgesia' (RIA) for the management of pain (16). Hypnotic treatment reduced the severity of pain at the beginning of post partum periods after episiotomy (17). These findings showed that hypnotic treatment was effective for reducing pain. Hypnotic treatment can be an effective pain management for Indonesia women in post partum periods (10). According to hypnosis experts, information can enter into our minds through the sensory canals, namely visual (auditory), auditory (auditory), kinesthetic), olfactory and gustatory. In the process, every information will experience deletion, generalization or distortion (18). Furthermore, the information entered then continues to be used as an internal representation and becomes an internal state, and eventually will change a person's behavior (behavior). Potentially, medical hypnosis could be used alone for pain relief as part of a woman's care after childbirth.

CONCLUSION

Hypnotic treatment reduced the severity of pain at the beginning of post partum periods after episiotomy. These findings showed that hypnotic treatment was effective for reducing pain. Hypnotic treatment can be an effective pain management for Indonesia women in post partum periods.

ACKNOWLEDGMENTS

Our gratitude goes to the academics majoring in nursing at the Faculty of Health Science Jenderal Sudirman University and also to the Research and Service Institute of Jenderal Sudirman University for the support and funding of this research.

REFERENCES

- Kimani-murage EW, Kimiywe J, Kabue M, Wekesah F, Matiri E, Muhia N, et al. Feasibility and effectiveness
 of the baby friendly community initiative in rural Kenya: study protocol for a randomized controlled trial.
 2015:1-14.
- Ikeda H, Takasu S, Murase K. Contribution of anterior cingulate cortex and descending pain inhibitory system
 to analgesic effect of lemon odor in mice. Mol Pain. 2014;10(1):2–9.
- A NKSJA. An educational intervention to reduce pain and improve pain management for Malawian people living with HIV/AIDS and their family carers: Study protocol for a randomised controlled trial. TT -.Trials. 2013;14(216):[8]p.
- 4. Klainin-Yobas P, Oo WN, Suzanne Yew PY, Lau Y. Effects of relaxation interventions on depression and anxiety among older adults: A systematic review. Aging Ment Heal. 2015;19(12):1043–55.
- Lupu V, Lupu IR. Cognitive behavioral hypnotherapy in a case of irritable bowel syndrome. J Evidence -Based Psychother. 2018;18(1):35–44.
- Peters SL, Yao CK, Philpott H, Yelland GW, Muir JG, Gibson PR. Randomised clinical trial: the efficacy of gut-directed hypnotherapy is similar to that of the low FODMAP diet for the treatment of irritable bowel syndrome. Aliment PharmacolTher. 2016;44(5):447–59.
- Kalisch Ellett LM, Lim R, Pratt NL, Kerr M, Ramsay EN, Leblanc T V., et al. Reducing hypnotic use in insomnia management among Australian veterans: Results from repeated national interventions. BMC Health Serv Res. 2018;18(1):1–11.
- 8. Riehl ME, Pandolfino JE, Palsson OS, Keefer L. Feasibility and acceptability of esophageal-directed hypnotherapy for functional heartburn. Dis Esophagus. 2016;29(5):490–6.
- 9. Häuser W, Hagl M, Schmierer A, Hansen E. Wirksamkeit, Sicherheit und Anwendungsmöglichkeitenmedizinischer Hypnose: Einesystematische Übersicht von Metaanalysen. Dtsch Arzteb Int. 2016;113(17):289–96.
- 10. Vasant DH, Whorwell PJ. Gut-focused hypnotherapy for Functional Gastrointestinal Disorders: Evidence-base, practical aspects, and the Manchester Protocol. NeurogastroenterolMotil. 2019;31(8):1–12.
- Young Hak R, Hyun Sik G, Jeong Hwan K, Kyung Pyo N, Young Ho L, Goo Hyun B. Factors associated with postoperative nausea and vomiting in patients undergoing an ambulatory hand surgery. CiOSClinOrthop Surg. 2014;6(3):258–66.
- Naga BSHB, Al-atiyyat NMH, Adaptation R, Ram M. The Relationship between Pain Experience and Roy Adaptation Model: Application of Theoretical Framework Abstract. MIddle East J Nurs [Internet]. 2013;7(6):18–23. Available from: http://www.me-jn.com/February 2014/RAM.pdf
- Parker R, Jelsma J, Stein DJ. Pain in amaXhosa women living with HIV/AIDS: A cross-sectional study of ambulant outpatients. BMC Womens Health. 2017;17(1):1–12.
- 14. Šimurina T, Mraovic B, Skitarelić N, Andabaka T, Sonicki Z. Influence of the menstrual cycle on the incidence

- of nausea and vomiting after laparoscopic gynecological surgery: A pilot study. J ClinAnesth. 2012;24(3):185–92.
- Jong MC, Boers I, van Wietmarschen HA, Tromp E, Busari JO, Wennekes R, et al. Hypnotherapy or transcendental meditation versus progressive muscle relaxation exercises in the treatment of children with primary headaches: a multi-centre, pragmatic, randomised clinical study. Eur J Pediatr. 2019;178(2):147–54.
- Krishanani MK, Ali FA, Khan A, Late K, Qidwai W, Ali BS. Educational Intervention among Barbers to Improve Their Knowledge regarding HIV / AIDS: A Pilot Study from a South Asian Country. 2014;32(3):386-90.
- 17. Lemay V, Hoolahan J, Buchanan A. Impact of a yoga and meditation intervention on students' stress and anxiety levels. Am J Pharm Educ. 2019;83(5):747–52.
- Han H-R, Kim K, Murphy J, Cudjoe J, Wilson P, Sharps P, et al. Community health worker interventions to promote psychosocial outcomes among people living with HIV—A systematic review. PLoS One [Internet]. 2018;13(4):e0194928. Available from: http://dx.plos.org/10.1371/journal.pone.0194928